PTO/SB/31 (02-01)
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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES			Oocket Number (Optional) VGN 600.1 CIP (L)	
CERTIFICATE OF EFS WEB TRANSMISSION	Martin C. M. Barnardo et al.			
Date November 30, 2009 I hereby certify that this correspondence and any other attachment noted on the automated Acknowledgment Receipt, is being	Application Number 10/623,802		Filed July 22, 2003	
transmitted from within the Pacific Time zone to the Commissioner for Patents via the EFS Web server on the date indicated above	For Method			
Suzanne Baycan (Name)				
(Signature) /Suzanne Baycan/	Group Art Unit Examiner 1641 COUNTS, GARY W			
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner, dated May 29, 2009, rejecting the following claims: 22-25, 34-37, 46 and 47				
The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 540.00 .				
Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$				
☐ A check in the amount of the fe	A check in the amount of the fee is enclosed.			
Payment by credit card. Form	Payment by credit card. Form PTO-2038 is attached.			
	The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
credit any overpayment, to Dep	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>80-3994</u> . I have enclosed a duplicate copy of this sheet.			
A petition for an extension of tire	A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
l am the				
☐ assignee of record of the entire interest. ☐ applicant.				
attorney or agent of record.				
□ attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. 47.016				
November 30, 2009 Date	0, 2009 /Shirley A. Recipon/ (Signature)			
Shirley A. Recipon, Reg. No. 47,016 (Typed or printed name and Reg. No.)				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below."				
★ Total of 1 forms are submitted.				

Burden No. Statement: This form is estimated to take 0.2 Journ to complete. Time will vary describing upon the mends of the individual cases. Any comments on the amount of time you are exquent to complete this term should be sent to the Collect Internation Clines or Patient and Tadeward Office. P.O. Box 1450, Alexandria, VA 22131-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Commissioner for Patents. P.O. Box 1450, Assandria, VA 22131-1450.